

DEC 19 2019

S.D. SEC. OF STA.

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER DELL RAPIDS TRIBUNE		2. DATE 10/1/2019
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ \$148.40
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 200 S. Minnesota Ave, Sioux Falls, Minnehaha, SD 57104		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 200 S. Minnesota Ave, Sioux Falls, SD 57104		
6. FULL NAME OF PUBLISHER: Maribel Wadsworth, 7950 Jones Branch Dr, McLean, VA 22107		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME Gannett MHC Media, Inc.		COMPLETE MAILING ADDRESS 7950 Jones Branch Dr, McLean, VA 22107
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
Weekly		
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	2,171	1,740
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	222	169
2. Mail Subscription (Paid and or requested)	214	174
3. Paid Electronic Copies	0	0
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	436	343
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	24	17
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	460	360
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	1,711	1,380
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	2,171	1,740

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

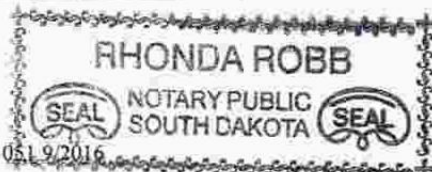
I swear that the statements made by me are true, correct, and complete:

Lisa Swadlow *Business Manager*
(Signature) (Title)

State of South Dakota)

County of *Minnehaha*)

(Seal)



Form: SOS REC 0519/2016

Sworn to before me this *23* day of *Oct*, 20*19*

Rhonda Robb
Notary Public

My commission expires: *1/24/20*